Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

116970

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                |                               |                              |                  |     | SMALL ENTITY TYPE O |                        |    | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|--|---|----------------|-------------------------------|------------------------------|------------------|-----|---------------------|------------------------|----|-------------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 18             |                               |                              |                  | ſ   | RATE                | FEE                    |    | RATE                          | FEE                    |
| FOR   |  |   | NUMBER FILED   |                               | NUMBER EXTRA                 |                  |     | BASIC FEE           | 375.00                 | OR | BASIC FEE                     | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | / // minus 20= |                               | *&                           |                  |     | X\$ 9=              |                        | OR | X\$18=                        |                        |
| INDEPENDENT CLAIMS  |  |   | ゥ mi           | nus 3 =                       | *&                           |                  |     | X42=                |                        | OR | X84=                          |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM P                              | RESENT         |                               |                              |                  |     | +140=               |                        | OR | +280=                         |                        |
| * If  | the difference                                 | in column 1 is                            | less than ze   | ero, enter                    | r "0" in d                   | column 2         | L   | TOTAL               |                        | OR | TOTAL                         | 750                    |
|   | C  | LAIMS AS A<br>(Column 1)                  | MENDED         | - PAR<br>(Colur               |                              | (Column 3)       | Y   | SMALL ENTITY        |                        | OR | OTHER THAN<br>SMALL ENTITY    |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY         | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus          | **                            |                              | =                | ]   | X\$ 9=              |                        | OR | X\$18=                        |                        |
|   | Independent                                    | *   | Minus          | ***                           |                              | =                | ] [ | X42=                |                        | OR | X84=                          |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                  |     | +140=               |                        | OR | +280=                         |                        |
|   |  |   |                |                               |                              |                  |     | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE           |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                |                               |                              |                  |     |                     |                        |    |                               |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVI<br>PAID  | IBER<br>OUSLY                | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus          | **                            |                              | =                | ] [ | X\$ 9=              |                        | OR | X\$18=                        |                        |
|   | Independent                                    | *   | Minus          | ***                           | T CL AIM                     | =                |     | X42=                |                        | OR | X84=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                |                               |                              |                  |     | +140=               |                        | OR | +280=                         |                        |
|   | TOTAL<br>ADDIT. FEE                            |   |                |                               |                              |                  |     |                     |                        | OR | TOTAL<br>ADDIT. FEE           |                        |
|   |  | 1   |                |                               |                              |                  |     |                     |                        |    |                               |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus          | **                            |                              | =                | ] [ | X\$ 9=              |                        | OR | X\$18=                        |                        |
|   | Independent                                    | *   | Minus          | ***                           |                              | =                | ]   | X42=                |                        |    | X84=                          |                        |
|   | FIRST PRESE                                    | ULTIPLE DE                                | PENDEN         | T CLAIM                       |                              | Į L              |     |                     | OR                     |    |                               |                        |
| * If the entry in column 1 is less than the entry in column 2 write 50% in column 2   |  |   |                |                               |                              |                  |     |                     |                        | OR | +280=                         |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                |                               |                              |                  |     |                     |                        |    |                               |                        |